

(To be completed during first contact with case)

Smallpox Case Report ID#: _____ Date of report: _____

CASE INFORMATION

Name: Last: _____ First: _____ Middle: _____
 Date of Birth : MM /DD / YYYY. Sex: Male _____ Female _____ Race/ethnicity: _____
 Home telephone number: () _____ - _____ Contact name/relationship: _____
 Telephone number: () _____ - _____
 Home address: (street address) _____
 City _____ State _____ Zip _____
 Information provided by: Case _____ Household member _____ Other/relationship _____

MEDICAL INFORMATION*Clinical information:*Fever onset date: MM /DD / YYYY, Highest temp: _____ Rash onset date: MM /DD / YYYY

Rash presentation: vesicles _____ pustules _____ scabs _____ hemorrhagic _____ flat _____

Is the case HIV positive: Yes _____ No _____ Unknown _____

Does the case have any other pre-existing medical conditions that may compromise the immune system (e.g. leukemia, cancers)? Yes _____ No _____ Unknown _____ If yes, please specify: _____

During the month prior to rash onset, did case take medication that affect the immune system such as chemotherapy agents or steroids? Yes _____ No _____ Unknown _____ If yes, please specify: _____

Is the case pregnant: Yes _____ No _____ Unknown _____

Medical evaluation date: MM /DD / YYYY

Place of medical evaluation (clinic, hospital, etc.): _____

Person performing medical evaluation:

Name: Last: _____ First: _____ Middle: _____

Contact telephone number: () _____ - _____

Title: _____

Smallpox vaccination history

Note: This vaccine has not been offered routinely in the United States since 1971 except to health care workers through the late 1970s and the military into 1980s

Was the case vaccinated against smallpox prior to 2001? Yes _____ No _____ Unknown _____ If yes, date: _____

Is a smallpox vaccination scar present? Yes _____ No _____

Was the case vaccinated against smallpox since 2001? Yes _____ No _____ Unknown _____

Case status

Admitted to hospital/clinic _____ Discharged to home _____ Died _____ Lost to follow up _____

Name of hospital/clinic: _____

Telephone: () _____ - _____

EPIDEMIOLOGIC INFORMATION

Is this case laboratory-confirmed (see Smallpox Case Definition and Classification)?

Yes_____ No_____ Unknown_____

If yes, by what method? _____

Is this case epidemiologically-linked to a confirmed, probable, or suspect case: Yes_____ No_____ Unknown_____

If yes, which type of case: _____

Transmission setting: Home_____ Work_____ School_____ Hospital_____ Military_____

Other_____, specify _____

Classification of case (see Smallpox Case Definition and Classification):

Confirmed_____ Probable_____ Suspect_____

Name of person reporting the case:

Last:_____ First:_____ Middle: _____

Contact telephone number: () _____ - _____

Date of report submission MM /DD / YYYY

Name of person completing form:

Last:_____ First:_____ Middle: _____

Contact telephone number: () _____ - _____

Date of report submission MM /DD / YYYY

Has the case traveled outside of their counties of residence or work since onset of fever? Yes No Unknown

If yes, where? City: _____ State: _____ Country: _____

Traveled by: Car_____ Bus_____ Train_____ Plane_____ Travel dates, from _____ to _____

SMALLPOX CASE DEFINITION AND CLASSIFICATION

Clinical Case Definition: An illness with acute onset of fever >101 F followed by a rash characterized by vesicles or firm pustules in the same stage of development without other apparent cause.

Laboratory Criteria for Diagnosis* (to be conducted in Level C or D laboratories only)

1. Isolation of smallpox (Variola) virus from a clinical specimen, (Level D laboratory only), or
2. Polymerase chain reaction (PCR) identification of variola DNA in a clinical specimen, or
3. Negative stain Electron microscopy (EM) identification of Variola virus in a clinical specimen (Level D laboratory or approved Level C laboratory)

*Level D laboratories include the CDC and USAMRIID. Initial confirmation of a smallpox outbreak requires testing in a Level D laboratory. Level C laboratories will assist with testing of clinical specimens following initial confirmation of an outbreak by CDC.

Case Classification

Confirmed case = A case that meets the above case definition and is laboratory confirmed

Probable case = A case that meets the clinical case definition that is not laboratory confirmed but has an epidemiological link to another confirmed or probable case.

Suspect case = A case that meets the clinical case definition but is not laboratory confirmed and does not have an epidemiological link to a confirmed or probable case of smallpox, OR a case that has an atypical presentation that is not laboratory confirmed but has an epidemiological link to a confirmed or probable case of smallpox. Atypical presentations of smallpox include a) hemorrhagic and b) flat, velvety lesions not appearing as typical vesicles nor progressing pustules.